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Foreword

The *Standards for Adult Correctional Institutions, Third Edition*, was published in January, 1990. Since that time, the Standards Committee has made more than ninety changes to the manual, providing that there is an ever-present need for standards to evolve and incorporate current trends, issues, and concerns. The Standards Committee and the American Correctional Association have worked together to modernize the standards to provide the corrections community with the guidance for developing institutions of the highest caliber. The committee debates over policy and procedures to make sure that the standards are not only practical in their application, but are truly improving the quality of life for staff and offenders.

The Commission on Accreditation for Corrections and the American Correctional Association have undergone changes as well. Corrections professionals have been acquainted with the term “performance-based standards” for quite some time now and have been aware of the Association’s initiative to improve the accreditation process by developing new standards in a performance-based model. A second major initiative for the Commission and the Association has been the development of new health care standards. The second manual published in the performance-based series was the *Performance-Based Standards for Correctional Health Care in Adult Correctional Institutions*. Several years in the making, this manual reflects contemporary health care practices that ensure a higher quality health care program while providing clinical and correctional managers with an indispensable management tool.

The *Standards for Adult Correctional Institutions, Fourth Edition*, is a compilation of the third edition, the changes made by the Standards Committee through January 2002 and the new health care standards from the *Performance-Based Standards for Correctional Health Care in Adult Correctional Institutions, First Edition*. It is the intent of the American Correctional Association to provide agencies with a user-friendly manual that serves as an update as well as an introduction to performance-based standards for the adult correctional institution. In the near future, the adult correctional institution standards will be completely revised using the performance-based model. Until that time, agencies can use the performance-based health care expected practices in this manual to gain experience in data collection and providing outcome measures.

The American Correctional Association is committed to promoting and improving the field of corrections and will continue to provide the industry with the support needed to face the challenges that confront correctional professionals every day.

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Introduction to Accreditation

ACA and the Commission on Accreditation for Corrections (CAC) are private, nonprofit organizations that administer the only national accreditation program for all components of adult and juvenile corrections. Their purpose is to promote improvement in the management of correctional agencies through the administration of a voluntary accreditation program and the ongoing development and revision of relevant, useful standards.

Accreditation, a process that began in 1978, involves approximately 80 percent of all state departments of corrections and youth services as active participants. Also included are programs and facilities operated by the Federal Bureau of Prisons, the U.S. Parole Commission, and the District of Columbia. For these agencies, the accreditation program offers the opportunity to evaluate their operations against national standards, remedy deficiencies, and upgrade the quality of correctional programs and services. The recognized benefits from such a process include improved management, a defense against lawsuits through documentation and the demonstration of a "good faith" effort to improve conditions of confinement, increased accountability and enhanced public credibility for administrative and line staff, a safer and more humane environment for personnel and offenders, and the establishment of measurable criteria for upgrading programs, personnel, and the physical plant on a continuing basis.

The timelines, requirements, and outcomes of the accreditation process are the same for a state or federal prison, training school, local detention facility, private halfway house or group home, probation and parole field service agency, or paroling authority. All programs and facilities sign a contract, pay an accreditation fee, conduct a self-evaluation, and have a standards compliance audit by trained ACA auditors before an accreditation decision is made by the Commission on Accreditation for Corrections. Once accredited, all programs and facilities submit annual certification statements to ACA. Also, at ACA's expense and discretion, a monitoring visit may be conducted during the initial three-year accreditation period to ensure continued compliance with the appropriate standards.

Participation in the Accreditation Process

Invitations to participate in the accreditation process have been extended to all adult and juvenile agencies for which standards have been developed and published. Participating agencies include public and private agencies; federal, state, and local agencies; and United States and Canadian correctional agencies.

Accreditation activities are initiated voluntarily by correctional administrators. When an agency chooses to pursue accreditation, ACA staff will provide the agency with appropriate information and application materials. These include a contract, the applicable manual of standards, a policy and procedure manual, and an organization summary.

Eligibility Criteria

To be eligible for accreditation, an agency must be a part of a governmental or private entity or conform to the applicable federal, state, and local laws and regulations regarding corporate existence. The agency must: (1) hold under confinement pretrial or presentenced adults or juveniles who are being held pending a hearing for unlawful activity; or (2) hold under confinement sentenced adult offenders convicted of criminal activity or juveniles adjudicated to confinement; or (3) supervise in the community sentenced adult or adjudicated juvenile offenders, including juveniles placed in residential settings; and (4) have a single administrative officer responsible for agency operations. It is this administrative officer who makes formal application for admission for accreditation.

It is ACA's policy that nonadjudicated juveniles should be served outside the juvenile correctional system. Training schools housing status offenders must remove them before the facility can be awarded accreditation. Detention facilities may house status offenders who have violated valid court orders by continued perpetration of status offenses. In such instances, the following conditions would apply: status offenders are separated by sight and sound from delinquent offenders; facility staff demonstrate

attempts to mandate removal of all status offenders from detention centers; and special programs are developed for status offenders.

ACA does not prohibit community programs that house adjudicated juveniles with status offenders in nonsecure settings from participation in accreditation. However, ACA actively supports and requires exclusion of status offenders from the criminal and juvenile justice systems. Residential facilities and institutional programs that house adults and juveniles separated by sight and sound may become accredited. Individual cases may stipulate removal of juveniles before receiving an accreditation award.

Preaccreditation Assessment

Prior to signing an accreditation contract, an agency may request a preaccreditation assessment. The assessment requires an ACA auditor to visit the agency. The auditor will assess strengths and areas for improvement, measure readiness for application for accreditation, and identify steps required to achieve accreditation. A confidential, written report is provided to the agency to assist in making the decision to apply for accreditation.

Applicant Status

When the agency enters into the accreditation process, the administrator requests an information package from ACA. To confirm eligibility, determine appropriate fees, and schedule accreditation activities, the agency provides ACA with relevant narrative information through the organization summary. Applicant Status begins when both the completed organization summary, which provides a written description of the facility/program, and the signed contract are returned to ACA. The Association will notify the agency of its acceptance into the accreditation process within fifteen days of the receipt of the necessary application materials. ACA will then assign a regional manager from the Standards and Accreditation Department as a permanent liaison to the agency. The agency will appoint an accreditation manager, who will be responsible for organizing and supervising agency resources and activities to achieve accreditation.

As defined in the contract, the fees for the accreditation period cover all services normally provided to an agency by ACA staff, auditors, and the Commission. The fees are determined during the application period and are included in the contract signed by the agency and ACA.

Correspondent Status

When the application is accepted, the agency enters into Correspondent Status. During this time, the agency conducts a self-assessment of its operations and completes a self-evaluation report, which specifies the agency's level of standards compliance. (Self-evaluation reports are optional for facilities signing a reaccreditation contract.)

At the agency's request and expense, an on-site accreditation orientation for staff and/or a field consultation may be scheduled. The object of the orientation is to prepare agency staff to complete the requirements of accreditation, including an understanding of self-evaluation activities, and compiling of documentation, audit procedures, and standards interpretation. A field auditor provides information on accreditation policy and procedure, standards interpretations, and/or documentation requirements. Agency familiarity with standards and accreditation is the key factor in determining the need for these services.

The self-evaluation report includes the organizational summary, a compliance tally, preliminary requests for waivers or plans of action, and a completed standards compliance checklist for each standard in the applicable manual.

Applicable Standards

The standards used for accreditation address services, programs, and operations essential to good correctional management, including administrative, staff and fiscal controls, staff training and development, physical plant, safety and emergency procedures, sanitation, food service, rules and

discipline, and a variety of subjects that comprise good correctional practice. These standards are under continual revision to reflect changing practice, current case law, new knowledge, and agency experience with their application. These changes are published by ACA in the *Standards Supplement*.

ACA policy addresses the impact of the standards revisions on agencies involved in accreditation. Agencies signing contracts after the date that a *Standards Supplement* is published are held accountable for all standards changes in that supplement. Agencies are not held accountable for changes made after the contract is signed. The agencies may choose to apply new changes to the standards that have been issued following the program's entry into accreditation. Agencies must notify ACA of their decision before conducting the standards compliance audit.

For accreditation purposes, any new architectural design, building, and/or renovation of the institution must be in accordance with the current standards manual at the time of the design, building, and/or renovation. In such cases, different standards would be applied to separate parts of the institution, according to these changes in the physical plant.

Standards Compliance Checklist

In completing a standards compliance checklist, the agency checks compliance, noncompliance, or not applicable for each standard. Checking *compliance* signifies complete compliance with the content of the standard/expected practice at all times and that the agency has documentation (primarily written) available to support compliance. A finding of *noncompliance* indicates that all or part of the requirements stated in the standard/expected practice have not been met. A *not applicable* response means that the standard/expected practice is clearly not relevant to the agency/facility being audited. A written statement supporting nonapplicability of the standard/expected practice is required.

At this time, the agency may request a waiver for one or more standards/expected practices, provided that overall agency programming compensates for the lack of compliance. The waiver request must be accompanied by a clear explanation of the compensating conditions. The agency applies for a waiver only when the totality of conditions safeguard the life, health, and safety of offenders and staff. Waivers are not granted for standards/expected practices designated as mandatory and do not change the conclusion of noncompliance or the agency's compliance tally. When a waiver is requested during the self-evaluation phase, ACA staff renders a preliminary judgment. A final decision can be made only by the Board of Commissioners during the accreditation hearing. Most waivers granted are for physical plant standards.

The Association requires that a self-evaluation report be completed by each applicant for accreditation. It is recommended that agencies entering into the accreditation process for the first time submit a written statement to ACA concerning their status at the completion of the evaluation. Information contained in this statement should include the percentage of compliance with mandatory and nonmandatory standards/expected practices; a list of not applicable standards/expected practices; and a list of noncompliant standards/expected practices and their deficiencies. Within 60 days of receipt of this statement, ACA staff will provide the agency administrator with a written response containing, where appropriate, comments on materials or information submitted to the Association. The letter also provides notice to the agency of its acceptance to Candidate Status.

The compilation of written documentation requires the most time and effort during Correspondent Status. A separate file, which documents compliance, is prepared for each standard/expected practice.

To request an audit, an agency must comply with 100 percent of the standards/expected practices designated as mandatory and 90 percent of the nonmandatory standards/expected practices.

Candidate Status

The agency enters into Candidate Status with ACA's acceptance of the self-evaluation report or agency certification of its completion. Candidate Status continues until the agency meets the required level of compliance, has been audited by a visiting committee composed of ACA auditors, and has been awarded or denied a three-year accreditation by the Board of Commissioners. Candidate Status may last up to 12 months.